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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Emmanuel First name L. Middle name Harris Last name and Suffix (Sr., Jr., II, III)	_	April First name R. Middle name Harris Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.			FKA April R. Jeter FKA April R. Windom
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9023		xxx-xx-2532

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Debtor 1 Emmanuel L. Harris
Debtor 2 April R. Harris

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)			
		LING			
Where you live	3603 Crosby Street	If Debtor 2 lives at a different address:			
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
	Winnebago				
	County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINS Where you live 3603 Crosby Street Rockford, IL 61107 Number, Street, City, State & ZIP Code Winnebago County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filling this petition, I have lived in this district longer than in any other district. I have another reason.			

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Deb	tor 2	April R. Harris					Case number (if known)			
Part	2:	Tell the Court About	our Bank	ruptcy C	ase					
Bank		chapter of the cruptcy Code you are sing to file under				of each, see <i>Notice Require</i> page 1 and check the appro		Individuals Filing for Bankruptcy		
OII	CHOC	ising to me under	■ Chapt	er 7						
			☐ Chapt	er 11						
			☐ Chapt	er 12						
			☐ Chapt	er 13						
8. How <u>1</u>		you will pay the fee	abo	vill pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more yout how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, o der. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or chapter-printed address.						
						allments. If you choose this (Official Form 103A).	option, sign and attach the	Application for Individuals to Pay		
			☐ I re	quest the	at my fee be wai	ived (You may request this our fee, and may do so only	if your income is less than	or Chapter 7. By law, a judge may, 150% of the official poverty line that		
							(Official Form 103B) and file	choose this option, you must fill out e it with your petition.		
9.	bank	you filed for ruptcy within the	■ No.							
	last 8	3 years?	☐ Yes.							
				District		When	Case nu			
				District		When	Case no	·		
				District		When	Case no	ımber		
10.		any bankruptcy s pending or being	■ No							
	filed not fi you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.							
				Debtor			Relations	ship to you		
				District		When	Case nur	mber, if known		
				Debtor				ship to you		
				District		When	Case nur	mber, if known		
11.		ou rent your lence?	□ No.	Go to	line 12.					
	resid	lence :	Yes.	Has y	our landlord obta	ined an eviction judgment a	gainst you?			
					No. Go to line 1	2.				
					Yes. Fill out <i>Init</i> bankruptcy peti		ction Judgment Against You	(Form 101A) and file it with this		

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Debtor 1 Emmanuel L. Harris

Deb	otor 2 April R. Harris				Case number (if known)
Par	Report About Any Bu	ısinesses	You Owr	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	I Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?		deadline operation	s. If you ir	ndicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Dar	t 4: Report if You Own or	· Hayo Any	, Hazardo	ous Proporty or An	by Property That Needs Immediate Attention
	Do you own or have any	■ No.	Tiazaruc	us i roperty of Air	y Froperty That Needs infinediate Attention
	property that poses or is alleged to pose a threat of imminent and	Yes.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own			·	
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
	argont ropulis:				Number, Street, City, State & Zip Code

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Debtor 1 Emmanuel L. Harris
Debtor 2 April R. Harris Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-81115 Doc 1 Filed 05/22/18 Entered 05/22/18 15:00:54 Desc Main Document Page 6 of 60

	tor 1 Emmanuel L. Ha tor 2 April R. Harris	rris	Documen			umber (if known)			
Part	6: Answer These Ques	tions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." □ No. Go to line 16b.						
			■ Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you ow	ve that are not consu	mer debts or bus	siness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do are paid that funds will be ava				id administrative expenses		
	administrative expenses are paid that funds will		■ No						
	be available for distribution to unsecured creditors?	d	□Yes						
	How many Creditors do you estimate that you	■ 1-49 □ 50-99		□ 1,000-5,000 □ 5001-10,00		☐ 25,001-50 ☐ 50,001-10			
	owe?	☐ 100-1 ☐ 200-9	99	☐ 10,001-25,0		☐ More than			
19.	How much do you estimate your assets to be worth?	■ \$0 - \$50,000 □ \$50,001 - \$100,000		1 \$10,000,00	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million		,001 - \$1 billion 00,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million		000,001 - \$50 billion n \$50 billion		
20.	How much do you estimate your liabilities	□ \$0 - \$	50,000 001 - \$100,000	□ \$1,000,001 □ \$10,000,00			,001 - \$1 billion		
	to be?	□ \$100,	001 - \$500,000 001 - \$5 million	□ \$50,000,00	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Part	:7: Sign Below								
For	you	I have ex	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
			chosen to file under Chapter 7, tates Code. I understand the rel						
			rney represents me and I did no nt, I have obtained and read the				lp me fill out this		
			relief in accordance with the ch	•					
			and making a false statement, on cy case can result in fines up to I.						
		Emman	nanuel L. Harris nuel L. Harris e of Debtor 1		/s/ April R. H April R. Har Signature of D	ris			
		Executed			· ·	May 22, 2018 MM / DD / YYYY			

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		Document Page 7 of 60
Debtor 1 Debtor 2	Emmanuel L. Harri April R. Harris	S Case number (if known)
	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b)
•	not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.
	-	/s/ Daniel A. Springer Date May 22, 2018 Signature of Attorney for Debtor MM / DD / YYYY
		Daniel A. Springer Printed name
	-	Springer Law Firm Firm name
		5301 E. State Street Suite 105
	-	Rockford, IL 61108 Number, Street, City, State & ZIP Code

Email address

Contact phone **815.312.4725**

6314059 IL Bar number & State dspringerlaw@gmail.com

		DOGUIII	eni Paue o Ul UU	
ill in this infor	mation to identify your	case:		
Debtor 1	Emmanuel L. Har	ris		
	First Name	Middle Name	Last Name	
Debtor 2	April R. Harris			
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		V	4 .
		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)		
••	1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,873.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	6,873.00
Par	t 2: Summarize Your Liabilities		
		Your lia	abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	96,562.00
	Your total liabilities	\$	96,562.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,039.04
_		· —	·
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,948.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
	■ Yes		
7.	What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known)

Page 9 of 60 Document Debtor 1 **Emmanuel L. Harris** Debtor 2 April R. Harris

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,636.52

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	45,520.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	45,520.00

Case 18-81115 Doc 1 Filed 05/22/18 Entered 05/22/18 15:00:54 Desc Main Document Page 10 of 60 Fill in this information to identify your case and this filing: Debtor 1 **Emmanuel L. Harris** Middle Name First Name Last Name Debtor 2 April R. Harris (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Volkswagen Do not deduct secured claims or exemptions. Put Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Jetta** ☐ Debtor 1 only Model Creditors Who Have Claims Secured by Property. 2014 Year: Debtor 2 only Current value of the Current value of the 86577 Debtor 1 and Debtor 2 only Approximate mileage: entire property? portion you own? Other information: ☐ At least one of the debtors and another \$5,525.00 \$5,525.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for

\$5,525.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

D 1 4	Case 18-8		Doc 1	Filed 05/22/18 Document	Entere Page 11	d 05/22/18 15:00 L of 60	0:54	Desc Main
Debtor 1 Debtor 2	Emmanuel L April R. Harri					Case number (if	f known)	
<i>Exam</i> µ □ No	hold goods and fulles: Major appliand	urnishing: ces, furnitu	s ure, linens, ch	ina, kitchenware				
		Couch, Access	•	kbeds, Queen Bed,	Dressers,	Kitchen Utensils &		\$500.00
□ No	oles: Televisions ar			stereo, and digital equip a players, games	oment; compu	uters, printers, scanners;	music co	ollections; electronic devices
		TV, Mic	rowave					\$100.00
Examp	tibles of value oles: Antiques and other collection				oks, pictures,	or other art objects; stam	np, coin,	or baseball card collections;
		Books,	Pictures					\$100.00
Exam _l	nent for sports an oles: Sports, photog musical instru	graphic, ex iments			bicycles, poo	I tables, golf clubs, skis; o	canoes a	and kayaks; carpentry tools;
		Sports	Equipment					
■ No □ Yes 11. Cloth Exan □ No	nples: Pistols, rifles Describe es	-		, and related equipment				
		Used C	lothing					\$200.00
■ No □ Yes		velry, cost	ume jewelry,	engagement rings, wed	ding rings, he	irloom jewelry, watches,	gems, g	old, silver
Exan □ No -	nples: Dogs, cats, b	oirds, horse	es					
		Fish. Ca	at					\$0.00

Official Form 106A/B Schedule A/B: Property page 2

Dobtor 1	Case 18-8:		Doc 1	Filed 05/22/18 Document	Entered 05/22 Page 12 of 60	2/18 15:00:54	Desc Main
Debtor 1 Debtor 2	April R. Harris				c	ase number (if known)	
■ No	other personal and		-	ı did not already list, i	ncluding any health ai	ds you did not list	
				om Part 3, including a	ny entries for pages y	ou have attached	\$1,200.00
	Describe Your Financia						
Do you o	own or have any leg	gal or eq	juitable intere	est in any of the follow	ring?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	mples: Money you ha			ur home, in a safe depo	osit box, and on hand w	hen you file your petitio	on
						Cash	\$135.00
Exar □ No		you hav	e multiple acco	ounts with the same ins	stitution, list each.	dit unions, brokerage h	nouses, and other similar
		17.1.	Checking	Pre-paid	card		<u>\$13.00</u>
<i>Exar</i> ■ No	ls, mutual funds, or nples: Bond funds, ir	nvestmei		th brokerage firms, mor	ney market accounts		
19. Non-					orporated businesses	, including an interes	t in an LLC, partnership, and
■ No							
☐ Yes	s. Give specific infor		about them ne of entity:			% of ownership:	
Nego	otiable instruments in	nclude pe	ersonal checks	s, cashiers' checks, pro	egotiable instruments missory notes, and mor by signing or delivering	ney orders.	
☐ Yes	s. Give specific inforr		bout them er name:				
	ement or pension a mples: Interests in IR			(k), 403(b), thrift saving	s accounts, or other pe	nsion or profit-sharing	plans
☐ Yes	s. List each account s		ely. f account:	Institution r	name:		
Your		deposits	you have mad		tinue service or use fronctric, gas, water), teleco		nies, or others
	S			Institution r	name or individual:		
23. Annu	ities (A contract for	a period	ic payment of	money to you, either for	r life or for a number of	years)	

Case 18-81115 Doc 1 Filed 05/22/18 Entered 05/22/18 15:00:54 Desc Main Document Page 13 of 60 Debtor 1 **Emmanuel L. Harris** April R. Harris Debtor 2 Case number (if known) Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No

	Case 1	8-81115	Doc 1	Filed 05/22/18		5/22/18 15:00:54	Desc Main
Debt Debt		el L. Harris		Document	Page 14 of	Case number (if known)	
Debt	or 2 April R. H	aiiis				Case Humber (II known)	
	Yes. Describe ead	ch claim					
35. A	ny financial asset	s you did not	already list				
-	No						
	Yes. Give specific	information					
26		us of all of ve	antriaa fr	om Dout 4 including o	av antriaa far nam	an yeu haya attachad	
				om Part 4, including a			\$148.00
						I	
Part !	Describe Any Bus	siness-Related	Property You	Own or Have an Interest	n. List any real esta	te in Part 1.	
37. D e	o you own or have ar	ny legal or equi	itable interest	in any business-related p	roperty?		
	No. Go to Part 6.						
	Yes. Go to line 38.						
Part (Bescribe Any Far	m- and Comme	ercial Fishing.	Related Property You Ow	n or Have an Interes	et In	
Tait	If you own or have				ir or riave air linteres	ic III.	
46 D	o vou own or have	any legal or	r equitable in	nterest in any farm- or o	commercial fishin	a-related property?	
	No. Go to Part 7.	c ally legal of	equitable iii	iterest in any famil- or t	Johnner Clar Hailin	g-related property:	
	Yes. Go to line 47.						
	1 763. 3 0 to line 47.						
Part 7	7: Describe All	Property You	Own or Have a	an Interest in That You Did	l Not List Above		
53. D	lo you have other Examples: Season t	property of and inches the property of an inches in the property of the proper	ny kind you (v club membe	did not already list?			
	No	iokoto, oodini	y oldo mombi	Stormp			
	Yes. Give specific	information					
						1	
54.	Add the dollar val	ue of all of yo	our entries fr	om Part 7. Write that n	umber here		\$0.00
						ı	
Part 8	List the Total	s of Each Part	of this Form				
55.	Part 1: Total real	estate, line 2					\$0.00
56.	Part 2: Total vehic	les, line 5			\$5,525.00		· · · · · · · · · · · · · · · · · · ·
57.	Part 3: Total perso	onal and hous	sehold items	s, line 15	\$1,200.00		
58.	Part 4: Total finan	cial assets, li	ine 36		\$148.00		
	Part 5: Total busing	_			\$0.00		
	Part 6: Total farm-	_			\$0.00		
61.	Part 7: Total other	property not	t listed, line	54 +	\$0.00		
62.	Total personal pro	perty. Add lir	nes 56 throug	h 61	\$6,873.00	Copy personal property to	stal \$6,873.00
63.	Total of all proper	ty on Schedu	ıle A/B. Add I	line 55 + line 62			\$6,873.00

Official Form 106A/B Schedule A/B: Property page 5

			111 1 11111 113 01 00	
Fill in this infor	mation to identify your	case:		
Debtor 1	Emmanuel L. Har	ris		
	First Name	Middle Name	Last Name	
Debtor 2	April R. Harris			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				☐ Check if this is a
(ii iaiomi)				amanded filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are	you claiming?	Check one only	even if	your spouse is filin	g with y	ou.
----	-----------------------------	---------------	----------------	---------	----------------------	------------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2014 Volkswagen Jetta 86577 miles Line from Schedule A/B: 3.1	\$5,525.00		\$2,400.00	735 ILCS 5/12-1001(c)
Life from Schedule A.D. 3.1			100% of fair market value, up to any applicable statutory limit	
2014 Volkswagen Jetta 86577 miles	\$5,525.00		\$3,125.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
Couch, Table, Bunkbeds, Queen Bed, Dressers, Kitchen Utensils &	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Accessories Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
TV, Microwave	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Life from Schedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit	
Books, Pictures Line from Schedule A/B: 8.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Line from <i>Scriedule A/B</i> : 0.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 2 April R. Harris Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Sports Equipment** 735 ILCS 5/12-1001(b) \$300.00 \$300.00 Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit **Used Clothing** 735 ILCS 5/12-1001(a) \$200.00 \$200.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Cash 735 ILCS 5/12-1001(b) \$135.00 \$135.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: Pre-paid card 735 ILCS 5/12-1001(b) \$13.00 \$13.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Yes

Debtor 1

			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Emmanuel L. Har	ris		
	First Name	Middle Name	Last Name	
Debtor 2	April R. Harris			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(ii kilowii)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Case 10-01115 L	Document	Page 18 of 60	34 Desc Main
Fill in this i	information to identify your			
Debtor 1	Emmanuel L. Har	rie		
Dobto! !	First Name	Middle Name	Last Name	
Debtor 2	April R. Harris			
(Spouse if, filing	g) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	LINOIS	
Case numb	er			
(if known)				☐ Check if this is an
				amended filing
Official E	Form 106E/F			
		/ha Haya Unasayrad	Claima	12/15
		/ho Have Unsecured	Claims 'Y claims and Part 2 for creditors with NONF	12/15
Schedule D: (eft. Attach the name and case	Creditors Who Have Claims Sec	ured by Property. If more space is a ge. If you have no information to rep	o not include any creditors with partially se needed, copy the Part you need, fill it out, n port in a Part, do not file that Part. On the to	umber the entries in the boxes on the
1. Do any o	creditors have priority unsecure	d claims against you?		
■ No. G	Go to Part 2.			
☐ Yes.				
	ist All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any o	creditors have nonpriority unsec	cured claims against you?		
☐ No. Y	ou have nothing to report in this p	eart. Submit this form to the court with	your other schedules.	
Yes.				
unsecure	ed claim, list the creditor separately	y for each claim. For each claim listed	e creditor who holds each claim. If a credito I, identify what type of claim it is. Do not list clain have more than three nonpriority unsecured claim.	ms already included in Part 1. If more
				Total claim
4.1 AT	'&Т	Last 4 digits of acc	ount number	\$1,387.00
	priority Creditor's Name Box 6416	When was the debt	incurred?	
	rol Stream, IL 60197			
	nber Street City State Zlp Code o incurred the debt? Check one.	As of the date you f	file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and and	other Type of NONPRIOR	RITY unsecured claim:	
	Check if this claim is for a com	munity		
deb			ng out of a separation agreement or divorce tha	it you did not
= 1			or profit-sharing plans, and other similar debts	
		Other, Specify	Utilities	

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Debtor 1 Debtor 2	Emmanuel L. Harris April R. Harris	Case number (if know)	
4.2	Capital One Bank USA NA	Last 4 digits of account number	\$450.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 30281	When was the debt incurred?	V .00000
1	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	☐ Debtor 1 only ■ Debtor 2 only	☐ Contingent ☐ Unliquidated	
]] c	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt s the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
_	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
[Yes	■ Other. Specify Credit Card Purchases	
	CEP America Illinois Nonpriority Creditor's Name	Last 4 digits of account number	\$418.00
1	1425 N. Randall Road Elgin, IL 60123	When was the debt incurred?	
1	Number Street City State Zlp Code Nho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
[Debtor 2 only	☐ Unliquidated	
[☐ Debtor 1 and Debtor 2 only	☐ Disputed	
[At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
c	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	s the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
[☐ Yes	Other. Specify Medical Bills	
	Choice Recovery	Last 4 digits of account number	\$435.00
ı	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 20790	When was the debt incurred?	
1	Columbus, OH 43220 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	Debtor 1 only	Пол	
_	Debtor 2 only	☐ Contingent ☐ Unliquidated	
_	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans	
c	in this claim is for a community debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Collecting for Creditor	

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Debtor 2 April R. Harris Case number (if know) 4.5 Last 4 digits of account number \$11,580.00 CNAC Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 10/2015 5695 E State St. Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Vehicle Deficiency ☐ Yes 4.6 \$444.00 Comcast Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 3005 Southeastern, PA 19398 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utilities ☐ Yes 4.7 Comcast Last 4 digits of account number \$469.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 3005 Southeastern, PA 19398 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utilities

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	1 Emmanuel L. Harris 2 April R. Harris	Case number (if know)	
4.8	Commonwealth Edison	Last 4 digits of account number	\$474.00
	Nonpriority Creditor's Name Attn: System Credit/BK Dept. 3 Lincoln Center 4th Floor Oakbrook Terrace, IL 60181	When was the debt incurred?	V
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Utilities	
	Li fes	Other. Specify Othlites	
	Credit Acceptance Corp. Nonpriority Creditor's Name	Last 4 digits of account number	\$5,896.00
	PO Box 5070 Southfield, MI 48086	When was the debt incurred? 2/2014	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Auto Deficiency	
	Dept. of Education/Nelnet	Last 4 digits of account number	\$17,946.00
	Nonpriority Creditor's Name 121 S. 13th Street	When was the debt incurred?	
	Lincoln, NE 68508 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	_ ′	Disputed	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	■ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		Student Loans	

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or 2 April R. Harris	Case number (if know)	
DirecTV	Last 4 digits of account number	\$706.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 6550	When was the debt incurred?	
Englewood, CO 80155-6550 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Utilities	
Dish Network LLC		\$1,500.00
Nonpriority Creditor's Name	Last 4 digits of account number	ψ1,300.00
Attn: Bankruptcy Dept. 9601 S Meridian Blvd	When was the debt incurred?	
Englewood, CO 80112-5905 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no of the date you may the damnie. Oneok all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Debt Owed	
Federal Loan Servicing Credit	Last 4 digits of account number	\$23,074.00
Nonpriority Creditor's Name		4 -2,27
Attn: Bankruptcy Dept. PO Box 60610	When was the debt incurred?	
Harrisburg, PA 17106 Number Street City State Zlp Code	As of the date you file the claim is: Cheek all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	■ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	☐ Other. Specify	
	Student Loans	

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Debtor 2 April R. Harris Case number (if know) 4.1 **First Community Credit Union** \$3,891.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 978 **Beloit, WI 53512** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Auto Deficiency ☐ Yes 4.1 **First Premier Bank** \$180.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 3820 N Louise Ave Sioux Falls, SD 57107 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.1 **Grant Park Auto** \$3,936.00 Last 4 digits of account number 6 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 908 Broadway Rockford, IL 61104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Auto Deficiency

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2 April R. Harris	Case number (if know)	
Great American Financial	Last 4 digits of account number	\$2,411.0
Nonpriority Creditor's Name 20 W. Wacker Drive, Suite 2275	When was the debt incurred?	42 ,
Chicago, IL 60606 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Personal Loan	
IGS Energy	Last 4 digits of account number	\$181.
Nonpriority Creditor's Name 6100 Emerald Parkway	When was the debt incurred?	
Dublin, OH 43016 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other Specify Utilities	
Illinois Tollway Nonpriority Creditor's Name	Last 4 digits of account number	\$800.
Attn: Bankruptcy Dept. PO Box 5544	When was the debt incurred? 08/2017	
Chicago, IL 60680-5544		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Fines	

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	or 1 Emmanuel L. Harris or 2 April R. Harris	Case number (if know)	
4.2 0	John Pagan	Last 4 digits of account number	\$1,450.00
	Nonpriority Creditor's Name 280 Blackhawk Boulevard South Beloit, IL 61080	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Eviction	
4.2	MedChoice Medical Center	Last 4 digits of account number	\$700.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. Box 6107	When was the debt incurred? 08/2018	
	Rockford, IL 61125	_	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	Contingent	
		Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Debt	
4.2	Ortholllinois	Last 4 digits of account number	\$7,000.00
2	Nonpriority Creditor's Name Box 78620	When was the debt incurred? 04/2016	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Milwaukee, WI 53278-8620 Number Street City State Zlp Code	As of the date year file, the plains in Observal, all that seems	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Medical Debt	
		-· - =p-==//	

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	1 Emmanuel L. Harris 2 April R. Harris	Case number (if know)	
4.2	Orthopedic & Spine Surgery Assoc.	Last 4 digits of account number	\$25.00
	Nonpriority Creditor's Name 2971 W. Algonquin Road Algonquin, IL 60102	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.2	OSF St. Anthony Med Center	Last 4 digits of account number	\$4,276.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.2	Progressive Insurance	Last 4 digits of account number	\$118.00
	Nonpriority Creditor's Name 6300 Wilson Mills Road Cleveland, OH 44143	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other, Specify Credit Extension	

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Debt	or 2 April R. Harris	Case number (if know)	
4.2	Sprint		\$493.00
6	Sprint Nonpriority Creditor's Name	Last 4 digits of account number	\$493.00
	KSOPHT0101-Z4300	When was the debt incurred?	
4.2 6	6391 Sprint Parkway		
	Overland Park, KS 66251 Number Street City State Zlp Code	As of the date you file the claim is: Check all that anniv	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Пол	
		Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utilities	
4.2	US Cellular		\$600.00
7	Nonpriority Creditor's Name	Last 4 digits of account number	\$000.00
	Attn: Bankruptcy Dept.	When was the debt incurred?	
	8410 W. Bryn Mawr		
	Chicago, IL 60631		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
		Contingent	
	Debtor 2 only	Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes		
	☐ Yes	■ Other. Specify Debt Owed	
4.2	Verizon Wireless	Last 4 digits of account number	\$1,222.00
8	Nonpriority Creditor's Name		+ 1,====
	Attn: Bankruptcy Dept. PO Box 26055	When was the debt incurred?	
	Minneapolis, MN 55426	_	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify Utilities	

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Debtor 2 April R. Harris Case number (if know) 4.2 Wells Fargo Education SV \$4,500.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 84712 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Student Loans Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? ATG Credit LLC Line 4.23 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 14895 Chicago, IL 60614 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Convergent Healthcare Inc. Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 121 NE Jefferson St. Suite 100 Peoria, IL 61602 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Convergent Outsourcing** Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims PO Box 9004 Renton, WA 98057 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Convergent Outsourcing** Line 4.26 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims PO Box 9004 Renton, WA 98057 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Convergent Outsourcing** Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims PO Box 9004 Renton, WA 98057 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Credit Protection Association** Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept Part 2: Creditors with Nonpriority Unsecured Claims 13355 Noel Rd Ste 2100 Dallas, TX 75240

Official Form 106 E/F

Debtor 1 Emmanuel L. Harris

Last 4 digits of account number

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Debtor 1 Emmanuel L. Harris Debtor 2 April R. Harris Case number (if know) Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **David Carter** Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 308 W. State Street, Suite 215 ■ Part 2: Creditors with Nonpriority Unsecured Claims Rockford, IL 61101 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Enhanced Recovery Company** Line 4.26 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 57547 Jacksonville, FL 32241 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Enhanced Recovery Company** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 57547 Jacksonville, FL 32241 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Equifax** Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 740256 Part 2: Creditors with Nonpriority Unsecured Claims Atlanta, GA 30374 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Experian Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 4500 Part 2: Creditors with Nonpriority Unsecured Claims Allen, TX 75013 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Jefferson Capital Systems** Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 16 Mcleland Rd Saint Cloud, MN 56303 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? LVNV Funding Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims PO Box 10497 Greenville, SC 29603 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Mutual Management Services Co., Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims LLC ■ Part 2: Creditors with Nonpriority Unsecured Claims 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Receivable Management Services Line 4.25 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 361505 ■ Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43236 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Recovery One LLC** Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 3240 Henderson Road Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43220 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Rockford Mercantile Agency** Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Official Form 106 E/F

	Case number (if know)
Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims
On which entry in Part 1 or Part 2 did Line 4.9 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
On which entry in Part 1 or Part 2 did Line 4.3 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
On which entry in Part 1 or Part 2 did Line 4.6 of (Check one):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
On which entry in Part 1 or Part 2 did Line 4.13 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
On which entry in Part 1 or Part 2 did Line 4.20 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
On which entry in Part 1 or Part 2 did Line 4.9 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	On which entry in Part 1 or Part 2 did Line 4.9 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did Line 4.3 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did Line 4.6 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did Line 4.13 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did Line 4.20 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did Line 4.20 of (Check one):

type of unsecured claim.

					Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.		Total Claim
Total	OI.	Student loans	OI.	\$	45,520.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ —	0.00
	•		•	Ψ	0.00

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Debtor 1 Emmanuel L. Harris

April R. Harris

Case number (if know)

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ 96,562.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Emmanuel L. Hai	rris		
	First Name	Middle Name	Last Name	
Debtor 2	April R. Harris			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with w	whom you have the Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

		Docume	nt Page 33 d	of 60	
Fill in this in	formation to identify your	case:			
Debtor 1	Emmanuel L. Hai	ris			
Dobto: 1	First Name	Middle Name	Last Name		
Debtor 2	April R. Harris				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an	
				amended filing	
Schedu Codebtors are people are fili	ing together, both are equ	re also liable for any debt ally responsible for supp	lying correct informat	12/1: as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Pages to this page. On the top of any Additional Pages, write	ge,
	nd case number (if known)			to this page. On the top of any Additional Pages, which	B
1. Do you	u have any codebtors? (If	you are filing a joint case, c	lo not list either spouse	as a codebtor.	
■ No □ Yes					
Arizona, o	California, Idaho, Louisiana to to line 3. Did your spouse, former spo	, Nevada, New Mexico, Pue	erto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)	
in line 2	again as a codebtor only i 6D), Schedule E/F (Officia	f that person is a guarant	or or cosigner. Make	r if your spouse is filing with you. List the person sho sure you have listed the creditor on Schedule D (Offi 06G). Use Schedule D, Schedule E/F, or Schedule G to	cial
	lumn 1: Your codebtor ne, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the de	bt
Nan	,	5546		Check all schedules that apply:	
3.1				☐ Schedule D, line	
Nan	me			☐ Schedule E/F, line	
				☐ Schedule G, line	
Nun	mber Street			_	
City		State	ZIP Code		
3.2				□ Sahadula D. lina	
Nan	me			□ Schedule D, line □ Schedule E/F, line	
				☐ Schedule G, line	
Nun City	mber Street	State	ZIP Code		
City		Glate	ZIF COUR		

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Fill	in this information to identify your o	350.								
	btor 1 Emmanuel									
	btor 2 April R. Har	ris								
Uni	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number nown)		-			☐ An ☐ A s		nt show	ing postpetition following date:	
0	fficial Form 106I					MM	1 / DD/ Y	YYY		
S	chedule I: Your Inc	ome					., 22, .			12/15
spo atta Pa	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. It 1: Describe Employment	ur spouse is not filing w	ith you, do not inclu	de infor	mati	on about y	our spo	use. If n	nore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-	filing spouse	
	If you have more than one job,	Employment status	☐ Employed				■ Employed			
	attach a separate page with information about additional	Linployment status	■ Not employed	[☐ Not employed					
	employers.	Occupation					Custom	er Serv	vice Manage	r
	Include part-time, seasonal, or self-employed work.	Employer's name				<u>_</u>	EVAC N	lorth A	merica	
	Occupation may include student or homemaker, if it applies.	Employer's address							d Drive IL 61016	
		How long employed t	here?				_1	year		
Pai	Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write \$	0 in the	space. I	nclude your no	n-filing
If yo	ou or your non-filing spouse have m e space, attach a separate sheet to	ore than one employer, co this form.	ombine the informatio	n for all	empl	oyers for th	at perso	n on the	lines below. If	you need
						For Debte	or 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	2,659.35	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	0.00	

0.00

2,659.35

4. Calculate gross Income. Add line 2 + line 3.

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	tor 1 tor 2	Emmanuel L. Harris April R. Harris	_	C	ase nu	mber (<i>if known</i>)				
	Con	ny line 4 hore	4		For D	ebtor 1		Debtor:	pouse	
	Cop	by line 4 here	4.	•	₽	0.00	Φ	Ζ,	659.35	=
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	;	\$	0.00	\$		290.07	
	5b.	Mandatory contributions for retirement plans	5b.	;	\$	0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	;	\$	0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d.	;	\$	0.00	\$		0.00	
	5e.	Insurance	5e.		\$	0.00	\$		443.24	_
	5f.	Domestic support obligations	5f.		₿	0.00	\$		0.00	_
	5g.	Union dues	5g.		§	0.00	\$		0.00	_
	5h.	Other deductions. Specify:	5h	+ :	\$	0.00	+ \$		0.00	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	S	0.00	\$		733.31	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	·	0.00	\$	1,	926.04	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	01	monthly net income.	8a.		§	0.00	\$		0.00	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8b.	;	₿	0.00	\$		0.00	_
		settlement, and property settlement.	8c.	;	\$	0.00	\$		0.00	
	8d.	Unemployment compensation	8d.	;	\$	0.00	\$	-	0.00	_
	8e.	Social Security	8e.	;	\$	1,113.00	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	;	\$ \$	0.00	\$ 		0.00 0.00	_
	8h.	Other monthly income. Specify:	8h	+ :	\$	0.00	+ \$		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		1,113.00	\$		0.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10. \$		4	113.00 + \$	4.0	26.04	= \$	2 020 04
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	<u> </u>	١,	113.00	1,9	20.04	= \$ _	3,039.04
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	deper				-	chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	3,039.04
13	Do	you expect an increase or decrease within the year after you file this form	?					L	Combi month	ned ly income
		No. Yes. Explain:	-							

Fill	in this informa	ation to identify y	our case:					
	otor 1	Emmanuel				Ch	eck if this is:	
	otor 2 ouse, if filing)	April R. Har	ris					wing postpetition chapte the following date:
Unit	ed States Bank	ruptcy Court for the	e: NORTI	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number nown)				_			
O	fficial Fo	orm 106J						
S	chedule	J: Your	Exper	nses				12
info	ormation. If m		eeded, atta	. If two married people ar ach another sheet to this on.				
Par	t 1: Desc	ribe Your Hous	ehold					
	□ No. Go to							
	■ Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N		st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate Housei	hold of De	ebtor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state				Daughter		6	□ No
	dependents	names.			Daugnter			■ Yes □ No
					Daughter		6	■ Yes
					Doughton		•	□ No
					Daughter		8	■ Yes □ No
					Daughter		10	■ Yes
								□ No
3.	Do vour ex	penses include	_	l Ni-	Daughter			Yes
0.	expenses d	of people other d your depende	than	No Yes				
Par	t 2: Estim	nate Your Ongo	ing Month	ly Expenses				
Est	imate your e	xpenses as of y a date after the	our bankr	uptcy filing date unless y cy is filed. If this is a supp				
• •					.			
the	value of suc	h assistance ar		government assistance i cluded it on <i>Schedule I:</i> \			V	
(Of	ficial Form 10	061.)					Your exp	enses
4.	The rental of payments as	or home owners and any rent for the	ship exper	nses for your residence. I or lot.	nclude first mortgage	4.	\$	1,035.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		erty, homeowner	's, or rente	r's insurance		4b.	·	0.00
			•	upkeep expenses		4c.	\$	0.00

5. Additional mortgage payments for your residence, such as home equity loans

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Debtor 1 Emmanuel L. Harris
Debtor 2 April R. Harris Case number (if known)

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Debtor 1	Emmanuel L. Harris			
Debtor 2	April R. Harris	Case num	ber (if known)	
. Uti	ities:			
o. Otti 6a.	Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.		200.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	220.00
6d.	Other. Specify:	6d.	\$	0.00
	od and housekeeping supplies	— od. 7.	\$	625.00
	Idcare and children's education costs	8.	\$	20.00
_	thing, laundry, and dry cleaning	9.	·	85.00
	sonal care products and services	10.		75.00
	dical and dental expenses	11.		50.00
	•	11.	Ψ	50.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	225.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
	aritable contributions and religious donations	14.	·	0.00
	urance.		·	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
150	. Vehicle insurance	15c.	\$	113.00
150	. Other insurance. Specify:	15d.	\$	0.00
	res. Do not include taxes deducted from your pay or included in lines 4 or 20.		· -	
_	ecify:	16.	\$	0.00
7. Ins	tallment or lease payments:			
17a	. Car payments for Vehicle 1	17a.	\$	0.00
17b	. Car payments for Vehicle 2	17b.	\$	0.00
170	. Other. Specify:	17c.	\$	0.00
170	. Other. Specify:	17d.	\$	0.00
3. Yo	ur payments of alimony, maintenance, and support that you did not report as			
ded	lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9. Otł	er payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sche			
	. Mortgages on other property	20a.		0.00
	. Real estate taxes	20b.	·	0.00
	. Property, homeowner's, or renter's insurance	20c.	·	0.00
	. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20€	. Homeowner's association or condominium dues	20e.	\$	0.00
. Oth	er: Specify:	21.	+\$	0.00
Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	2,948.00
	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2			2,946.00
			\$	
220	. Add line 22a and 22b. The result is your monthly expenses.		\$	2,948.00
3. Ca l	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,039.04
	Copy your monthly expenses from line 22c above.	23b.		2,948.00
_5		_00.	·	<u> </u>
230	. Subtract your monthly expenses from your monthly income.			
-	The result is your monthly net income.	23c.	\$	91.04
	, ,			
	you expect an increase or decrease in your expenses within the year after yo			
	example, do you expect to finish paying for your car loan within the year or do you expect your	mortgage	payment to increase	or decrease because of a
	ification to the terms of your mortgage?			
	Yes. Explain here:			

Schedule J: Your Expenses

page 3

Official Form 106J

Debtor 1 Emmanuel L. Harris	Fill in this information to identify your case:							
Debtor 2 April R. Harris Spouse if, filing First Name Midde Name Last Name	Debtor 1	Emmanuel L. Har	ris					
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (Il known) Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 It two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Emmanuel L. Harris Emmanuel L. Harris Signature of Debtor 2		First Name	Middle Name	Las	t Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (Iknown) Check if this is an amended filling Linux								
Case number (Il known) Check if this is an amended filing	(Spouse if, filing)	First Name	Middle Name	Las	t Name			
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X Isl Emmanuel L. Harris Emmanuel L. Harris Signature of Debtor 1	United States Ba	nkruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINO	S			
Declaration About an Individual Debtor's Schedules f two married people are filing together, both are equally responsible for supplying correct information. four must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Emmanuel L. Harris Emmanuel L. Harris Signature of Debtor 1 X /s/ April R. Harris Signature of Debtor 2								
Vou must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Emmanuel L. Harris Emmanuel L. Harris Signature of Debtor 1 X /s/ April R. Harris Signature of Debtor 2			ın Individua	I Debte	or's Sche	dules		12/15
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Emmanuel L. Harris Emmanuel L. Harris Signature of Debtor 1 X /s/ April R. Harris Signature of Debtor 2	You must file this obtaining money years, or both. 18	s form whenever you fi or property by fraud in 8 U.S.C. §§ 152, 1341, 1	le bankruptcy schedulen connection with a bar	es or amende	ed schedules. Maki	ng a false state		
■ No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Emmanuel L. Harris Emmanuel L. Harris Signature of Debtor 1 Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) X /s/ April R. Harris Signature of Debtor 2	Sigr	n Below						
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Emmanuel L. Harris Emmanuel L. Harris Signature of Debtor 1 Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) X /s/ April R. Harris Signature of Debtor 2	Did you pay	y or agree to pay some	one who is NOT an atto	orney to help	you fill out bankru	ptcy forms?		
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Emmanuel L. Harris Emmanuel L. Harris Signature of Debtor 1 Declaration, and Signature (Official Form 119) X /s/ April R. Harris Signature of Debtor 2	■ No							
that they are true and correct. X /s/ Emmanuel L. Harris Emmanuel L. Harris Signature of Debtor 1 X /s/ April R. Harris April R. Harris Signature of Debtor 2	☐ Yes. N	Name of person						
Emmanuel L. Harris Signature of Debtor 1 April R. Harris Signature of Debtor 2	•		that I have read the sui	mmary and s	chedules filed with	this declaration	on and	
Emmanuel L. Harris Signature of Debtor 1 April R. Harris Signature of Debtor 2	X /s/ Emr	manuel L. Harris		Х	/s/ April R. Harri	is		
·								
Date May 22, 2018 Date May 22, 2018	Signatur	re of Debtor 1			Signature of Debto	r 2		
	Date N	May 22, 2018			Date May 22, 2	018		

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		Last Name	
	Wilder Hamb	Edot Nume	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS	
			☐ Check if this is an amended filing
and accurate as possib	ole. If two married people ar	e filing together, both are equally responsit	
, , , , , ,		Lived Poters	
		Livea before	
ir current maritai status	67		
d urried			
last 3 years, have you li	ived anywhere other than w	here you live now?	
•	ived anywhere other than w	•	
•	·	•	Dates Debtor 2 lived there
st all of the places you liv	ved in the last 3 years. Do not Dates Debtor 1	t include where you live now.	
st all of the places you liv rior Address: ockford Avenue	ved in the last 3 years. Do not Dates Debtor 1 lived there From-To:	Debtor 2 Prior Address:	lived there Same as Debtor 1
֡֡֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜	First Name April R. Harris First Name Ankruptcy Court for the: orm 107 c of Financial A and accurate as possible nore space is needed, and and accurate as possible nore space is needed, and accurate as a possible nore space is needed, and accurate as a possible nore space is needed, and accurate as possible nore space is needed.	April R. Harris First Name Ankruptcy Court for the: NORTHERN DISTRICT Of the the thickness of the thickne	First Name Middle Name Last Name April R. Harris First Name Middle Name Last Name Ankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Drm 107 To of Financial Affairs for Individuals Filing for Bankruptcy and accurate as possible. If two married people are filing together, both are equally responsite nore space is needed, attach a separate sheet to this form. On the top of any additional pages on). Answer every question. Details About Your Marital Status and Where You Lived Before are current marital status?

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Emmanuel L. Harris
Debtor 2 April R. Harris

Case number (if known)

De	bioi 2 Ap	orii K. Harris			Case	e number (if known)	
Pa	rt 2 Exp	olain the Sourc	es of You	ır Income			
4.	Fill in the	total amount of	income yo	mployment or from operating ou received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No						
	_	Fill in the detail	ls.				
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		y 1 of current y filed for bankr		■ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$9,819.09
				☐ Operating a business		☐ Operating a business	
	r last caler nuary 1 to	ndar year: December 31,	2017)	■ Wages, commissions, bonuses, tips	\$13,943.00	■ Wages, commissions, bonuses, tips	\$18,504.00
				☐ Operating a business		☐ Operating a business	
		dar year befor December 31,		■ Wages, commissions, bonuses, tips	\$16,000.00	■ Wages, commissions, bonuses, tips	\$25,014.00
				☐ Operating a business		☐ Operating a business	
	and other winnings. List each	public benefit p If you are filing	payments; a joint cas gross inco		rest; dividends; money collec you received together, list it o	•	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	r last caler	,	2017)		\$0.00	Unemployment	\$6,510.00
(Ja	inuary 1 to	December 31,	<u> </u>		(before deductions and exclusions) \$0.00		and exclusions)
				Made Before You Filed for			
6.	□ No.	Neither Debt	or 1 nor E	's debts primarily consume Debtor 2 has primarily consu personal, family, or househo	umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
		- ~	days befo	ore you filed for bankruptcy, di	id you pay any creditor a tota	I of \$6,425* or more?	
		□ Yes L	ist below e	each creditor to whom you pai		n one or more payments and ations, such as child support	
		n	ot include	payments to an attorney for the	his bankruptcy case.	or after the date of adjustmen	•

Case 18-81115 Doc 1 Filed 05/22/18 Entered 05/22/18 15:00:54 Desc Main Page 42 of 60 Document Debtor 1 **Emmanuel L. Harris** Debtor 2 April R. Harris Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address **Total amount** Amount you Dates of payment Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment **Total amount** Reason for this payment Amount you still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Nature of the case Status of the case Case title Court or agency Case number Contract Credit Acceptance Corp. v. Winnebago County Circuit Pending **Emmanuel L. Harris** Court On appeal 2018 SC 771 400 W State St □ Concluded Rockford, IL 61101 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

Creditor Name and Address

Describe the Property

Date

Value of the property

Explain what happened

No. Go to line 11.

Yes. Fill in the information below.

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Del	btor 2	April R. Harris		Case numb	er (if known)	
11.	acco	unts or refuse to make a payment l		did any creditor, including a bank or financial you owed a debt?	institution, set off any	amounts from your
	`	No				
		Yes. Fill in the details.	_			
	Cred	litor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount
12.		n 1 year before you filed for bankr -appointed receiver, a custodian, o		as any of your property in the possession of a er official?	n assignee for the ben	efit of creditors, a
	_	No Yes				
Pa		Tes List Certain Gifts and Contributio	ne			
				lid you give one gifts with a total value of many	than \$600 mar maraan	2
13.	_	in 2 years before you filed for bank No	ruptcy, c	lid you give any gifts with a total value of more	e tnan \$600 per person	•
		Yes. Fill in the details for each gift.				
	Gifts	s with a total value of more than \$6	00	Describe the gifts	Dates you gave the gifts	Value
		son to Whom You Gave the Gift and	t			
14.	= 1	in 2 years before you filed for bank No Yes. Fill in the details for each gift or		lid you give any gifts or contributions with a to	otal value of more than	\$600 to any charity?
	Gifts more Char	s or contributions to charities that e than \$600 rity's Name ress (Number, Street, City, State and ZIP Co	total	Describe what you contributed	Dates you contributed	Value
Pai		List Certain Losses				
15.		n 1 year before you filed for bankr mbling?	uptcy or	since you filed for bankruptcy, did you lose ar	nything because of the	ft, fire, other disaster
	_	No Yes. Fill in the details.				
		cribe the property you lost and	Descri	be any insurance coverage for the loss	Date of your	Value of property
		the loss occurred	Include	the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property.		lost
Pai	rt 7:	List Certain Payments or Transfer	's			
	Withi	ulted about seeking bankruptcy or	preparii	d you or anyone else acting on your behalf pang a bankruptcy petition? s, or credit counseling agencies for services requi	, , ,	rty to anyone you
	_	No Yes. Fill in the details.				
	Addı			Description and value of any property transferred	Date payment or transfer was	Amount of payment
		il or website address on Who Made the Payment, if Not	You		made	
	530°	inger Law Firm 1 East State Street, Suite 105 kford. IL 61107		\$500.00	4/30/2018	\$500.00

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Debtor 2 April R. Harris Case number (if known) Person Who Was Paid Amount of Description and value of any property Date payment Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You \$8.95 5/2/2018 \$8.95 Access Credit Counseling 633 W 5th Street Suite 26001 Los Angeles, CA 90071 http://accesscounselinginc.org 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. П Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Nο Yes. Fill in the details. Name of trust **Date Transfer was** Description and value of the property transferred made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Type of account or Name of Financial Institution and Last 4 digits of Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or moved, or transfer transferred XXXX-2/2018 **Woodforest Bank** \$5.00 Checking Attn: Banruptcy Dept. □ Savings 3849 Northridge Dr ☐ Money Market Rockford, IL 61114 □ Brokerage ☐ Other_

Debtor 1

Emmanuel L. Harris

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Debtor 1 Emmanuel L. Harris
Debtor 2 April R. Harris

Case number (if known)

21.	 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? 				
		No Yes. Fill in the details.			
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Hav	e you stored property in a storage unit or pla	ace other than your home within 1 y	ear before you filed for bankruptcy	?
		No Yes. Fill in the details.			
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Pai	t 9:	Identify Property You Hold or Control for S	Someone Else		
23.		you hold or control any property that someon	ne else owns? Include any property	you borrowed from, are storing for	, or hold in trust
	=	No			
		Yes. Fill in the details. Ther's Name dress (Number, Street, City, State and ZIP Code)	(Number, Street, City, State and ZIP	Describe the property	Value
Pai	t 10:	Give Details About Environmental Informa	Code)		
		ourpose of Part 10, the following definitions			
Ŭ. ■					f h
	toxi	<i>ironmental law</i> means any federal, state, or l c substances, wastes, or material into the ai _u lations controlling the cleanup of these sub	r, land, soil, surface water, groundv	<u> </u>	
		means any location, facility, or property as own, operate, or utilize it, including disposal s		w, whether you now own, operate,	or utilize it or used
		<i>ardous material</i> means anything an environr ardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	substance,
₹ер	ort a	II notices, releases, and proceedings that yo	u know about, regardless of when	they occurred.	
24.	Has	any governmental unit notified you that you	may be liable or potentially liable u	under or in violation of an environme	ental law?
		No Yes. Fill in the details.			
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of any	·		
		No Yes. Fill in the details.			
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

Case 18-81115 Doc 1 Filed 05/22/18 Entered 05/22/18 15:00:54 Document Page 46 of 60 Debtor 1 **Emmanuel L. Harris** Debtor 2 April R. Harris Case number (if known) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Emmanuel L. Harris /s/ April R. Harris **Emmanuel L. Harris** April R. Harris Signature of Debtor 1 Signature of Debtor 2 Date May 22, 2018 **Date** May 22, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:					
Debtor 1	Emmanuel L. Har	ris			
	First Name	Middle Name	Last Name		
Debtor 2	April R. Harris				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number _				☐ Check if this is an amended filing	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2	Emmanuel L. Harris April R. Harris	Case number (if known)	
name:	otion of	☐ Retain the property and redeem it. ☐ Retain the property and enter into a	☐ Yes
propert		Reaffirmation Agreement. Retain the property and [explain]:	
securin	•	Tetain the property and [explain].	-
For any ui in the info You may a	ormation below. Do not list real estate leas assume an unexpired personal property le	listed in Schedule G: Executory Contracts and Unexpired less. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.).
Describe	your unexpired personal property leases		Will the lease be assumed?
	name: on of leased		□ No
Property:			☐ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Lessor's r			□ No
Property:	on of leased		□ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Lessor's r	name: on of leased		□ No
Property:	on on leased		☐ Yes
Lessor's r	name:		□ No
	on of leased		_
Property:			□ Yes
Lessor's r	name: on of leased		□ No
Property:	on on leased		□ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have indica hat is subject to an unexpired lease.	ated my intention about any property of my estate that sec	ures a debt and any personal
	Emmanuel L. Harris	X /s/ April R. Harris	
	manuel L. Harris ature of Debtor 1	April R. Harris Signature of Debtor 2	
Date	May 22, 2018	Date May 22, 2018	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-81115 Doc 1 Filed 05/22/18 Entered 05/22/18 15:00:54 Desc Main Document Page 53 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In 1	Emmanuel L.			Case N	0		
111 1	e April R. Harri	<u>IS</u>	Debtor(s)	Chapte			
			Debtor(s)	Спарис			
	DIS	SCLOSURE OF CO	OMPENSATION OF ATTO	ORNEY FOR I	DEBTOR(S)		
1.	compensation paid	to me within one year before	P. 2016(b), I certify that I am the attore the filing of the petition in bankruptomplation of or in connection with the b	y, or agreed to be pa	aid to me, for servi		
	For legal servi	ices, I have agreed to accept		\$	500.00		
	Prior to the fili	ing of this statement I have r	received		500.00		
	Balance Due				0.00	-	
2.	The source of the co	ompensation paid to me was					
	■ Debtor	☐ Other (specify):					
3.	The source of comp	pensation to be paid to me is:	:				
	■ Debtor	☐ Other (specify):					
4.	■ I have not agree	ed to share the above-disclos	sed compensation with any other perso	on unless they are m	embers and associa	ates of my law firm.	
	copy of the agre	reement, together with a list of	compensation with a person or persons of the names of the people sharing in the	he compensation is	attached.	my law firm. A	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 b. Preparation and c. Representation of d. [Other provision Negotiation reaffirma 	filing of any petition, sched of the debtor at the meeting on as needed] ions with secured credit	and rendering advice to the debtor in d dules, statement of affairs and plan whi of creditors and confirmation hearing, tors to reduce to market value; e oplications as needed; preparations is on household goods.	ch may be required; and any adjourned l xemption planning	nearings thereof;	and filing of	
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.						
			CERTIFICATION				
this	I certify that the for bankruptcy proceedi		ent of any agreement or arrangement f	or payment to me for	or representation of	the debtor(s) in	
	May 22, 2018		/s/ Daniel A. Sp	ringer			
_	Date		Daniel A. Sprin				
			Signature of Attor Springer Law F				
			5301 E. State S				
			Suite 105 Rockford, IL 61	108			
			815.312.4725	100			
			dspringerlaw@				
			Name of law firm				

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Desc Main

Springer Law Firm

5301 East State Street Suite 105, Rockford, IL

815.312.4275

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not
 include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law
 Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide
 information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not
 represent me in any other case or legal matter, unless agreed to in a separate retainer agreement.
- I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 8. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 9. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 5.7.18	
Signature: Emmanuel Harn's Print Name:	Attorney Signature: Attorney Print: Attorney Print:
Signature: Of Mais	
Print Name: April Harris	

United States Bankruptcy Court Northern District of Illinois

In re	Emmanuel L. Harris		Case No.			
mic	April R. Harris	Debtor(s)	Chapter	7		
	VE	RIFICATION OF CREDITOR M	ATRIX			
		Number of	Creditors: _	48		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of (our) knowledge.					
Date:	May 22, 2018	/s/ Emmanuel L. Harris Emmanuel L. Harris Signature of Debtor				
Date:	May 22, 2018	/s/ April R. Harris April R. Harris Signature of Debtor				

AT&T PO Box 6416 Carol Stream, IL 60197

ATG Credit LLC Attn: Bankruptcy Dept. PO Box 14895 Chicago, IL 60614

Capital One Bank USA NA Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130

CEP America Illinois 1425 N. Randall Road Elgin, IL 60123

Choice Recovery Attn: Bankruptcy Dept. PO Box 20790 Columbus, OH 43220

CNAC Attn: Bankruptcy Dept. 5695 E State St. Rockford, IL 61108

Comcast Attn: Bankruptcy Dept. PO Box 3005 Southeastern, PA 19398

Commonwealth Edison Attn: System Credit/BK Dept. 3 Lincoln Center 4th Floor Oakbrook Terrace, IL 60181

Convergent Healthcare Inc. Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100 Peoria, IL 61602 Convergent Outsourcing Attn: Bankruptcy Dept. PO Box 9004 Renton, WA 98057

Credit Acceptance Corp. PO Box 5070 Southfield, MI 48086

Credit Protection Association Attn: Bankruptcy Dept 13355 Noel Rd Ste 2100 Dallas, TX 75240

David Carter 308 W. State Street, Suite 215 Rockford, IL 61101

Dept. of Education/Nelnet 121 S. 13th Street Lincoln, NE 68508

DirecTV Attn: Bankruptcy Dept. PO Box 6550 Englewood, CO 80155-6550

Dish Network LLC Attn: Bankruptcy Dept. 9601 S Meridian Blvd Englewood, CO 80112-5905

Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013 Federal Loan Servicing Credit Attn: Bankruptcy Dept. PO Box 60610 Harrisburg, PA 17106

First Community Credit Union Attn: Bankruptcy Dept. PO Box 978 Beloit, WI 53512

First Premier Bank Attn: Bankruptcy Dept. 3820 N Louise Ave Sioux Falls, SD 57107

Grant Park Auto Attn: Bankruptcy Dept. 908 Broadway Rockford, IL 61104

Great American Financial 20 W. Wacker Drive, Suite 2275 Chicago, IL 60606

IGS Energy 6100 Emerald Parkway Dublin, OH 43016

Illinois Tollway Attn: Bankruptcy Dept. PO Box 5544 Chicago, IL 60680-5544

Jefferson Capital Systems Attn: Bankruptcy Dept. 16 Mcleland Rd Saint Cloud, MN 56303

John Pagan 280 Blackhawk Boulevard South Beloit, IL 61080

LVNV Funding Attn: Bankruptcy Dept. PO Box 10497 Greenville, SC 29603 MedChoice Medical Center Attn: Bankruptcy Dept. Box 6107 Rockford, IL 61125

Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235

OrthoIllinois Box 78620 Milwaukee, WI 53278-8620

Orthopedic & Spine Surgery Assoc. 2971 W. Algonquin Road Algonquin, IL 60102

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381

Progressive Insurance 6300 Wilson Mills Road Cleveland, OH 44143

Receivable Management Services PO Box 361505 Columbus, OH 43236

Recovery One LLC 3240 Henderson Road Columbus, OH 43220

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Shindler & Joyce 1900 East Algonquin Road, Suite 180 Schaumburg, IL 60173 Sprint KSOPHT0101-Z4300 6391 Sprint Parkway Overland Park, KS 66251

Stanislaus Credit Control 914 14th Street PO Box 480 Modesto, CA 95354

Stellar Recovery, Inc. Attn: Bankruptcy Dept. 1327 Highway 2 W, Suite 100 Kalispell, MT 59901

TransUnion 555 West Adams Street Chicago, IL 60661

US Cellular Attn: Bankruptcy Dept. 8410 W. Bryn Mawr Chicago, IL 60631

Verizon Wireless Attn: Bankruptcy Dept. PO Box 26055 Minneapolis, MN 55426

Wells Fargo Education SV Attn: Bankruptcy Dept. PO Box 84712 Sioux Falls, SD 57117

Winnebago County Circuit Court 400 W State St 2012 LM 1712 Rockford, IL 61101

Winnebago County Circuit Court 400 W State St 2018 SC 771 Rockford, IL 61101